

County: Pierce  
 PLUM CITY CARE CENTER  
 301 CHERRY STREET

Facility ID: 8800

Page 1

PLUM CITY 54761 Phone: (715) 647-2401  
 Operated from 1/1 To 12/31 Days of Operation: 365  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/01): 50  
 Total Licensed Bed Capacity (12/31/01): 50  
 Number of Residents on 12/31/01: 45

Ownership:  
 Highest Level License:  
 Operate in Conjunction with CBRF? Yes  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 42

Corporation  
 Skilled  
 Yes  
 Yes  
 Yes  
 42

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		35.6	
Home Health Care	No					1 - 4 Years		42.2	
Supp. Home Care-Personal Care	No					More Than 4 Years		22.2	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	2.2				
Day Services	Yes	Mental Illness (Org./Psy)	33.3	65 - 74	11.1				
Respite Care	Yes	Mental Illness (Other)	4.4	75 - 84	33.3			100.0	
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	44.4				
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	8.9				
Congregate Meals	Yes	Cancer	4.4			*****			
Home Delivered Meals	Yes	Fractures	2.2		100.0	Full-Time Equivalent			
Other Meals	Yes	Cardiovascular	8.9	65 & Over	97.8	Nursing Staff per 100 Residents			
Transportation	No	Cerebrovascular	22.2			(12/31/01)			
Referral Service	Yes	Diabetes	8.9	Sex	%	RNs		7.4	
Other Services	Yes	Respiratory	0.0			LPNs		15.3	
Provide Day Programming for		Other Medical Conditions	15.6	Male	28.9	Nursing Assistants,			
Mentally Ill	No			Female	71.1	Aides, & Orderlies			
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

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#### Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi - dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)	
Int. Skilled Care	0	0.0	0	1	4.2	103	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	2.2
Skilled Care	3	100.0	269	22	91.7	89	0	0.0	0	13	72.2	113	0	0.0	0	0	0.0	0	38	84.4
Intermediate	---	---	---	1	4.2	74	0	0.0	0	5	27.8	103	0	0.0	0	0	0.0	0	6	13.3
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	3	100.0		24	100.0		0	0.0		18	100.0		0	0.0		0	0.0		45	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	21.2	Daily Living (ADL)	Independent			
Private Home/With Home Health	13.5	Bathing	0.0	97.8	2.2	45
Other Nursing Homes	5.8	Dressing	17.8	75.6	6.7	45
Acute Care Hospitals	46.2	Transferring	22.2	73.3	4.4	45
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	22.2	75.6	2.2	45
Rehabilitation Hospitals	3.8	Eating	55.6	42.2	2.2	45
Other Locations	9.6	*****				
Total Number of Admissions	52	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	2.2	Receiving Respiratory Care	6.7	
Private Home/No Home Health	28.9	Occ/Freq. Incontinent of Bladder	64.4	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	24.4	Occ/Freq. Incontinent of Bowel	33.3	Receiving Suctioning	0.0	
Other Nursing Homes	0.0			Receiving Ostomy Care	0.0	
Acute Care Hospitals	17.8	Mobility		Receiving Tube Feeding	2.2	
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets	22.2	
Rehabilitation Hospitals	0.0					
Other Locations	8.9	Skin Care		Other Resident Characteristics		
Deaths	20.0	With Pressure Sores	4.4	Have Advance Directives	97.8	
Total Number of Discharges (Including Deaths)	45	With Rashes	2.2	Medications		
				Receiving Psychoactive Drugs	35.6	

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities  
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	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	84.0	82.7	1.02	85.1	0.99	84.3	1.00	84.6	0.99
Current Residents from In-County	68.9	82.1	0.84	80.0	0.86	82.7	0.83	77.0	0.89
Admissions from In-County, Still Residing	25.0	18.6	1.34	20.9	1.20	21.6	1.16	20.8	1.20
Admissions/Average Daily Census	123.8	178.7	0.69	144.6	0.86	137.9	0.90	128.9	0.96
Discharges/Average Daily Census	107.1	179.9	0.60	144.8	0.74	139.0	0.77	130.0	0.82
Discharges To Private Residence/Average Daily Census	57.1	76.7	0.74	60.4	0.95	55.2	1.04	52.8	1.08
Residents Receiving Skilled Care	86.7	93.6	0.93	90.5	0.96	91.8	0.94	85.3	1.02
Residents Aged 65 and Older	97.8	93.4	1.05	94.7	1.03	92.5	1.06	87.5	1.12
Title 19 (Medicaid) Funded Residents	53.3	63.4	0.84	58.0	0.92	64.3	0.83	68.7	0.78
Private Pay Funded Residents	40.0	23.0	1.74	32.0	1.25	25.6	1.56	22.0	1.82
Developmentally Disabled Residents	0.0	0.7	0.00	0.9	0.00	1.2	0.00	7.6	0.00
Mentally Ill Residents	37.8	30.1	1.26	33.8	1.12	37.4	1.01	33.8	1.12
General Medical Service Residents	15.6	23.3	0.67	18.3	0.85	21.2	0.73	19.4	0.80
Impaired ADL (Mean)	40.4	48.6	0.83	48.1	0.84	49.6	0.81	49.3	0.82
Psychological Problems	35.6	50.3	0.71	51.0	0.70	54.1	0.66	51.9	0.69
Nursing Care Required (Mean)	4.7	6.2	0.76	6.0	0.78	6.5	0.72	7.3	0.64